

**RECEIPT FOR CASH DONATIONS**  
**CHARLES COUNTY DEPARTMENT OF FISCAL AND ADMINISTRATIVE SERVICES**  
**Please Print Clearly**

**\*\* Complete this form for cash donations only**

Received From: \_\_\_\_\_

Business/Individual Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Amount of Contribution: \_\_\_\_\_

\_\_\_\_\_ No goods or services were provided in exchange, in whole or in part, for the donation.

\_\_\_\_\_ This donation is to be used at the County's discretion; or

☒ This donation is to be used specifically for the following purpose:

This donation is in support of County Commissioner Amanda Stewart's 2<sup>nd</sup> Back to School Community Fiesta

Date Received: \_\_\_\_\_ Check #: \_\_\_\_\_

Originator Signature: \_\_\_\_\_

Donor Signature: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Dept./Division: \_\_\_\_\_

- (1) Copy to Donor
- (2) Copy to FAS-Accounting
- (3) Copy to Originator
- (4) Copy to County Attorney's Office